



MISSOURI DEPARTMENT OF SOCIAL SERVICES
DIVISION OF FAMILY SERVICES
TITLE IV-E/FFP REDETERMINATION

DATE

PLACING INFORMATION

NAME

DCN

SOCIAL SECURITY NUMBER

IN CARE OF (PLACEMENT ADDRESS, STREET, CITY, STATE, ZIP CODE)

COUNTY

DATE OF BIRTH

CHILDREN SERVICES WORKER (CASE MANAGER)

REIMBURSABLE INFORMATION

1. Is the child employed?

☐ Yes

☐ No

☐ N/A

If yes, complete:

EMPLOYER

SALARY

FREQUENCY

DATES OF EMPLOYMENT

FROM

TO

FROM

TO

FROM

TO

2. Does the child receive any other income? (Check ZKID transaction

If yes, list the monthly amount below: for specific information)

☐ Yes

☐ No

☐ N/A

SOCIAL SECURITY

\$

SSI

\$

VA

\$

RR

\$

CHILD SUPPORT

\$

MILITARY

\$

OTHER INCOME

\$

3. Does the child own any resources or assets?

If yes, list below

☐ Yes

☐ No

☐ N/A

RESOURCE/ASSET

AMT/VALUE

BANK NAME AND ADDRESS

on Hand

ing/Savings

A/CD

Trust Account

Stocks/Bonds

Other

VEHICLES-OWNER(S)

MODEL

MAKE

YEAR

4. If the child is age 15 or older, is he/she attending school?

If yes, is the attendance:

☐ Full-Time

☐ Part-Time

☐ Yes

☐ No

☐ N/A

5. If the child is 18 and in school, is he/she expected to complete the course of study by age 19?

Expected graduation date:

/ /

☐ Yes

☐ No

☐ N/A

6. Does the child continue to be deprived of parental support and care of one

or both parents due to any of the following:

☐ Yes

☐ No

☐ N/A

Indicate reason:

☐ Incapacity

☐ Death

☐ Unemployment

☐ Continued absence from home

☐ TPR

If no, explain:

7. If reasonable efforts were not contained in a prior court order, are reasonable efforts contained in a court order received since last redetermination was completed? ☐ Yes ☐ No

If yes, enter date of court order: / /

(attach copy of court order to form)

8. Please check child's priority level for SSI application, if not completed previously:

☐ Priority 1

Children in residential or group care, career parent placements, medical and behavioral placements, psychiatric diversion or children with multiple placements (e.g., 6 within last 12 months).

Children who have obvious disabilities such as ADHD, learning disabilities, newborns whom were born drug affected or had a low birth weight. An SSI application will be made for the majority of children classified as priority 1.

☐ Priority 2

Children who have disabilities, but no documentation of disability. After documentation is obtained, an application will be made.

☐ Priority 3

Children who have no disabilities. An SSI application will not be made for these children.

☐ Check if pertinent documents are attached (psychological, medical reports, CS-SSI-1).

 / / Indicate expected receipt date of pertinent documents, if not attached.

CSW/DYS WKR/JUV. CT. WKR SIGNATURE

DATE

IF NECESSARY, ATTACH APPROPRIATE COURT ORDER(S) AND ALL OTHER PERTINENT INFORMATION.